

# Work Order ID 98267

\*98267\*

Page 1

March-12-13 1:45:10 PM

Item ID: D2011-101

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: 6" Mirror

Start Date: 3/11/13 Start Qty: 20.00

\*20\*

Cust Item ID:

Required Date: 3/22/13 Req'd Qty: 20.00

\*20\*

Customer:

Reference:

Approvals: Process Plan: ML5 Date: 13-03-15

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start \*NR1\*

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D2011

Rev G

100

0.00

\*100\*

PURCHASING

Purchasing

Memo

0.00

Purchasing

Issue P/O: 19366 Mirror P/N: CHM10601 Possible supplier:  
Auto Parts ExtraMaterial release note required

CL 13/03/18 (20)

110

Receive & Inspect for Damage & Mat'l Certs

0.00

\*110\*

Packaging

Memo

0.00

Packaging

Ensure material certification is attached

13/3/20 (20)

120

QC6- Inspect dimensions to drawing

0.00

\*120\*

QC

Memo

0.00

Quality Control

27  
153 26

20

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY										
<b>Landing Gear</b>			<b>General</b>							
<input type="checkbox"/> Bending	<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> Cracks	<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Wave/Twist in Tube
<input type="checkbox"/> Bend	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Burrs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Countersink	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Drawing	<input type="checkbox"/> Finish	<input type="checkbox"/> Folio
<input type="checkbox"/> Grain	<input type="checkbox"/> Hardware	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Misread	<input type="checkbox"/> Offset	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced	<input type="checkbox"/> Temperature/Cure	<input type="checkbox"/> Weld	<input type="checkbox"/> Wrong Stock Pulled
							<input type="checkbox"/> Other			

# Work Order ID 98267

**\*98267\***

Page 2

March-12-13 1:45:10 PM

Item ID: D2011-101

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: 6" Mirror

Start Date: 3/11/13 Start Qty: 20.00

**\*20\***

Cust Item ID:

Required Date: 3/22/13 Req'd Qty: 20.00

**\*20\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 <b>*130*</b> Small Fab	Small Fab	0.00				20x			SP 13/03/27
	Memo	0.00							
	1- Wrap mirror with plastic wrap								
	2- Discard Hardware & Install new hardware loosely								
	3- Crimp stud as per Dwg D2011								
140 <b>*140*</b> QC	QC5- Inspect part completeness to step on W/O	0.00				20			
	Memo	0.00							
	4- Test assembly to 50lbs pull test after 24 hours								
150 <b>*150*</b> Packaging	Identify as per dwg & Stock Location: ST 229	0.00				20x			SP 13-3-28
	Packaging	0.00							

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other

Work Order ID 98267

\*98267\*

Page 3

March-12-13 1:45:10 PM

Item ID: D2011-101

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: 6" Mirror

Start Date: 3/11/13 Start Qty: 20.00

\*20\*

Cust Item ID:

Required Date: 3/22/13 Req'd Qty: 20.00

\*20\*

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

160

QC21- Final Inspection - Work Order Release

0.00

\*160\*

QC

Memo

0.00

Quality Control

13/3/28  
MCS 13-03-28

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  <div style="display: flex; justify-content: space-around;"> <div> <input type="checkbox"/> Rework  <input type="checkbox"/> Scrap  <input type="checkbox"/> Use-as-is  <input type="checkbox"/> Work Order Update         </div> <div> <input type="checkbox"/> Skid-tube  <input type="checkbox"/> Machining  <input type="checkbox"/> Thermoforming  <input type="checkbox"/> Large Fab         </div> <div> <input type="checkbox"/> Crosstube  <input type="checkbox"/> Small Fab  <input type="checkbox"/> Finishing  <input type="checkbox"/> Composite         </div> <div> <input type="checkbox"/> Water Jet  <input type="checkbox"/> Prod. Eng. Coord.  <input type="checkbox"/> Rec/Store/Packaging  <input type="checkbox"/> Supplier         </div> <div> <input type="checkbox"/> Engineering  <input type="checkbox"/> Quality  <input type="checkbox"/> Other         </div> </div>	
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

# Picklist Print

March-12-13 1:45:09 PM

Page 1

Work Order ID: 98267

Parent Item: D2011-101

Parent Item Name: 6" Mirror

Start Date: 3/11/13

Required Date: 3/22/13

Start Qty: 20.00

Required Qty: 20.00

Comments: IPP: J04.09.15 Added Steps 5-7 KJ/JLM IPP: K05.12.15chg black sikaflex for white EC IPP L 08.11.06 new drawing EC verify: DD IPP: M 08.12.19 Added step 3 KJ Verified by: LL IPP rev N 10.01.13 added wrap per ncr09-118 EC verified by:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
<input checked="" type="checkbox"/> AN960JD416L Washer	NAS1149D0416J	Purchased	No			110	Each	6.0000	1	20		3/13/03/27	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				FP001		6							
				110153		6							
CHM-10601 Mirror 6"		Purchased	No			130	Each	0.0000	1	20	98267		
D2829 Threaded Stud		Manufactured	No			130	Each	31.0000	1	20	3/13/03/27		
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				GA		31							
				87624		2							
				90159		29							
<input checked="" type="checkbox"/> D3014-1 Locknut		Manufactured	No			130	Each	112.0000	1	20	3/13/03/27		
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST023		112							
				79705		23							
				90000		89							

B18605 10x

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

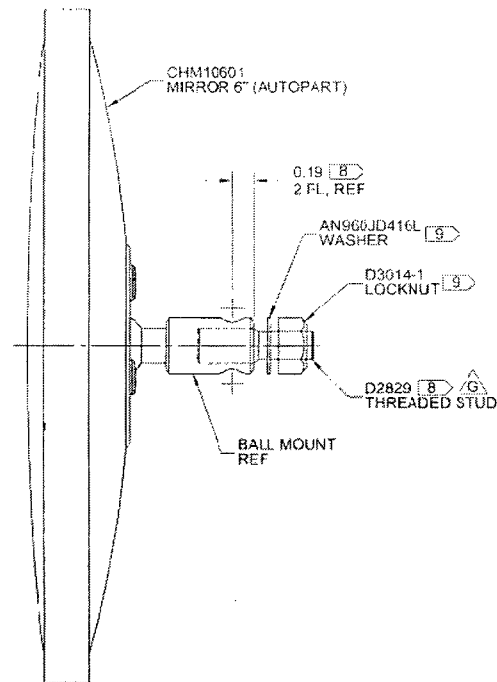
Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  <div style="display: flex; justify-content: space-around;"> <div>             Rework <input type="checkbox"/>              Scrap <input type="checkbox"/>              Use-as-is <input type="checkbox"/>              Work Order Update <input type="checkbox"/> </div> <div>             Skid-tube <input type="checkbox"/>              Machining <input type="checkbox"/>              Thermoforming <input type="checkbox"/>              Large Fab <input type="checkbox"/> </div> <div>             Crosstube <input type="checkbox"/>              Small Fab <input type="checkbox"/>              Finishing <input type="checkbox"/>              Composite <input type="checkbox"/> </div> <div>             Water Jet <input type="checkbox"/>              Prod. Eng. Coord. <input type="checkbox"/>              Rec/Store/Packaging <input type="checkbox"/>              Supplier <input type="checkbox"/> </div> <div>             Engineering <input type="checkbox"/>              Quality <input type="checkbox"/>              Other <input type="checkbox"/> </div> </div>	<b>AGAINST DEPARTMENT/PROCESS</b>
--	--	-----------------------------------

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

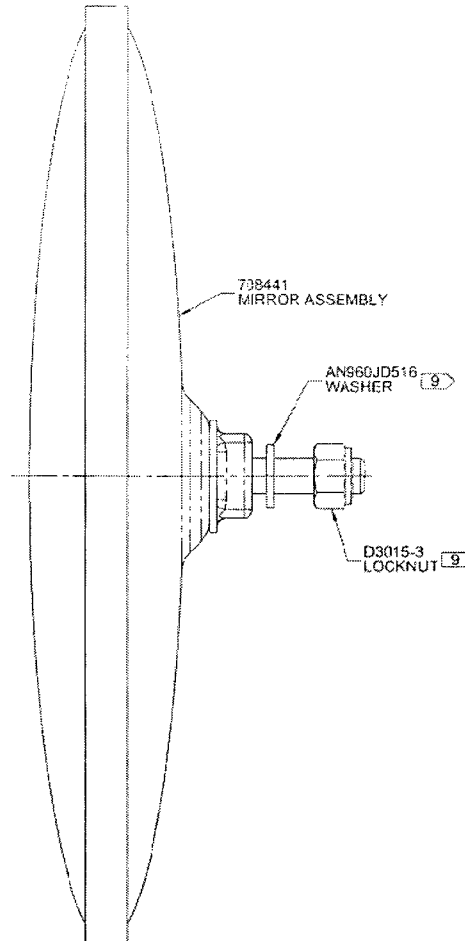
**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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**D2011-101 MIRROR ASSEMBLY 6"**



**D2011-103 MIRROR ASSEMBLY 8"**

**NOTES:**

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART OSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: D2011-101 = 0.6 lbs APPROX. ; D2011-103 = 1.0 lbs APPROX.
- 8) D2829 INSTALLATION PROCEDURE:
  - APPLY LOCKTITE 262 TO  $\phi 5/16$  END OF D2829
  - THREAD BY HAND INTO BALL MOUNT UNTIL ENTIRE  $\phi 5/16$  END OF D2829 IS WITHIN BALL MOUNT
  - CRIMP BALL MOUNT ON TWO OPPOSING SIDES, 0.19 FROM END AS ILLUSTRATED USING TOOL DT8317
  - CRIMP TO DEPTH OF 0.040  $\pm$  0.010 USING R0.125
- 9) INSTALL LOOSE

ITEM	QTY -101	QTY -103	P/N	DESCRIPTION
1	X		D2011-101	MIRROR ASSEMBLY 6"
2		X	D2011-103	MIRROR ASSEMBLY 8"
3	1		D2829	THREADED STUD
4	1		D3014-1	LOCKNUT
5	1		D3015-3	LOCKNUT
6	1		CHM10601	MIRROR 6" (AUTOPART)
7	1		738441	MIRROR 8" (VELVAC)
8	1		AN960JD416L	WASHER
9	1		AN960JD516	WASHER

**RELEASED**  
08-10-23/17

G	REDRAWN IN SOLIDWORKS TO CURRENT STANDARD AND TRANSFERRED TO "B" SIZE FORMAT. MIRROR 6" (AUTOPART) AND CHM10601 WERE MIRROR 6" (GROTE) AND P/N 78043 (ZIN D3-1). ADDED D2829 (ZIN D3-1) AND ZIN OS-1. REMOVED DRILLING NOTE, VIEW A-A AND SIKAFLEX APPLICATION NOTE. REASON: GROTE PRODUCT IS DISCONTINUED	MB	08-10-06
F	ADD HOLES FOR SEALANT ON -101	CP	04-09-10
E	NEW 8" MIRROR	CP	01-05-08
D	NEW 6" MIRROR, ADD NUT, REMOVED STUD	CP	01-04-73
C	REPLACE DOMINION AUTO MIRRORS WITH PHILLIPS, ADDED STUDS, REDRAWN	RF	99-06-01
B	SIKAFLEX 241 ADDED	JB	98-04-09
A	DWG NO WAS DSP1011, ADDED -103	JB	90-06-15
-	NEW ISSUE	JB	90-03-31
REV.	DESCRIPTION	BY	DATE
DESIGN	JB		
DRAWN			
CHECKED			
MFG APPR			
APPROVED			
DE APPR			
DATE	08.10.06		
<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA DRAWING NO. <b>D2011</b> TITLE <b>MIRROR ASSEMBLY</b> SHEET 1 OF 1 SCALE NTS COPYRIGHT © 1990 BY DART AEROSPACE LTD THIS DOCUMENT IS UNCLASSIFIED AND NOT CONTROLLED BY THE EXPORTS COMMISSION. IT IS NOT TO BE USED FOR ANY PURPOSES OR FOR ANY OTHER PURPOSES WITHOUT THE WRITTEN PERMISSION OF DART AEROSPACE LTD.			

98267 MLT

13-03-15



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO19366**

Purchase Order Date 3/18/13  
PO Print Date 3/18/13

Page Number 1 of 1

Order From : VC-AUT001

AUTO PARTS EXTRA  
1000 RUE LANSDOWNE  
HAWKESBURY, ON K6A 1H7  
CA

Contact Name  
Vendor Phone 613 632 1191  
Vendor Fax 613 632 2350  
Vendor Account Nbr

Buyer  
Requisition Nbr  
Tax Resale Nbr  
Terms  
Currency  
FOB

Chantal Lavoie  
10127-2607  
Net 30  
CAD  
Destination-Collect

Ship To : DART AEROSPACE LTD 1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**FXED**  
6/13/03/18

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	CHM-10601	Mirror 6"	3/21/13 Yes	20.00 Each	Yours ppd	\$20.7500	\$415.00
		Special Inst:	AS PER DWG D2011 REV. G B98267 P/N: CHM-10601				

PO Total: \$415.00

CERTIFICATE OF CONFORMITY  
REQD UPON DELIVERY

Change Nbr: 1

Change Date: 3/18/13

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required **YES** NO



**AUTO PARTS • PIÈCES D'AUTO  
TRUCK PARTS • PIÈCES DE CAMION  
PERFORMANCE PARTS • PIÈCES DE PERFORMANCE  
TIRES • PNEUS**



www.bensonautoparts.com

Fast due accounts bear 2% interest per month (24% per annum). If this account is placed with a 3rd party collection, an administrative cost of 25% will be added. All exchanges and refund claims must be accompanied by this invoice. Electrical parts not returnable. All parts returned are subject to 20% handling charge. All merchandise old on this invoice remains the vendor's property until this invoice is paid in full.  
TERMS: Payment due on 10th day of the following month.

Aucun remboursement sans cette facture. Net 30 jours, 2% de frais d'intérêt par mois (24% par année) sur compte en souffrance. 20% de frais de manutention sur toute marchandise retournée. Clause pénale une indemnité de 25% sera chargée sur compte sujet à des procédures légales. Les marchandises mentionnées sur cette facture demeurent la propriété du vendeur tant qu'elles ne seront pas entièrement payées. Pièces électriques non-retournable.  
TERMS: Compte payable le 10 du mois suivant.

SIGNATURE \_\_\_\_\_  
Thank You  
1000 RUE LANDSDOWNE HAWKESBURY, ON K6A 1H7  
TEL: (613)632-1191 FAX: (613)632-2350  
TVQ: 1016330716 TQ0001 - HST / TPS: 10035 3366 RT0001  
Merci

113336 (613)632-5200		113336		011					
VENDU: DART AEROSPACE LTD. 1270 ABERDEEN STREET A HAWKESBURY ON K6A 1K7		EXPÉDIER TO A *** SAME ***		DATE: 3/20/13 08:14 111 MLP					
PART No / PIÈCES		DESCRIPTION		LIST / CHACUN	COST / COÛTANT	EXTENSION			
D / COM	SHIP / EXP	CODE	CHM10601 ✓ //ici SHIP VIA	6 CONV. MIRROR, S/ BOV: TWD  PIECES/CORE TOT 242 <i>5 Durio</i>	30.00	20.75	415.00		
20	20	TWD							
	20	***							
INVOICE No / FACTURE		TYPE / SORTIE		TOTAL	DISC / ESC	FRT / TRANS	HST / TPS	TVQ	AMT to PAY / À PAYER
11202901		INVOICE		415.00	0.00	0.00	53.95	0.00	468.95